

<i>SERFF Tracking Number:</i>	<i>ACEH-125774935</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>ACE American Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
<i>Product Name:</i>	<i>08-GL-2007803</i>		
<i>Project Name/Number:</i>	<i>Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803</i>		

Filing at a Glance

Companies: ACE American Insurance Company, Indemnity Insurance Company of North America, Pacific Employers Insurance Company

Product Name: 08-GL-2007803	SERFF Tr Num: ACEH-125774935	State: Arkansas
TOI: 17.0 Other Liability - Claims Made/Occurrence	SERFF Status: Closed	State Tr Num: EFT \$50
Sub-TOI: 17.0001 Commercial General Liability Co Tr Num:		State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Betty Montesi, Edith Roberts
	Authors: Barb Niles, CPCU, ARP, Marlene Thomas, Bob Wolfrom	Disposition Date: 09/05/2008
	Date Submitted: 08/15/2008	Disposition Status: Approved
Effective Date Requested (New):		Effective Date (New):
Effective Date Requested (Renewal):		Effective Date (Renewal):
State Filing Description:		

General Information

Project Name: Independent forms filing for Entertainment Services Risk Status of Filing in Domicile: Purchasing Group

Project Number: 08-GL-2007803	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 09/05/2008	
State Status Changed: 09/05/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

New independent forms are being filed in support of Entertainment Services, Inc. a risk purchasing group, organized under the laws of the state of Kansas. These forms are being filed in ACE American Insurance Company, Indemnity Insurance Company of North America and Pacific Employers Insurance Company.

SERFF Tracking Number: ACEH-125774935 State: Arkansas
First Filing Company: ACE American Insurance Company, ... State Tracking Number: EFT \$50
Company Tracking Number:
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: 08-GL-2007803
Project Name/Number: Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803

LD-25450 Member Certificate Commercial General Liability

This form is provided to individual members of the risk purchasing group when a master policy is issued to Entertainment Services, Inc. This form clarifies coverage.

This form is mandatory. There is no premium associated with this form as it is a certificate.

LD-25451 Insured Event" Aggregate Limit

This form is attached to the ISO Commercial General Liability Coverage Form. The endorsement provides an Each "Insured Event" Aggregate Limit to each "insured event". This endorsement broadens coverage.

This endorsement is mandatory for any policy written in the risk purchasing group. There is no premium associated with this endorsement.

LD-25452 Amendatory Endorsement Entertainment Services, Inc., A Risk Purchasing Group

This form is attached to the ISO CGL Coverage Form when a Member Certificate is provided to individual members of the risk purchasing group and a master policy is issued to Entertainment Services, Inc. The endorsement amends WHO IS AN INSURED to include an "insured member" participating in "insured events"; states that the Limits of Insurance on the Declarations apply separately to each "insured member"; and that Entertainment Services, Inc. replaces the words first Named Insured found in the Conditions section. This endorsement broadens coverage.

This is a mandatory form and no premium is associated with the form.

LD-25453 Amendment – Damage To Property

This form broadens coverage in the CGL Coverage Form by changing the exception to the Damage To Property exclusion of paragraphs 1, 3 and 4 from 7 or fewer consecutive days to 30 or fewer consecutive days.

This is an optional form for any policy written in the risk purchasing group. There is no premium associated with this endorsement.

SERFF Tracking Number: ACEH-125774935 State: Arkansas
First Filing Company: ACE American Insurance Company, ... State Tracking Number: EFT \$50
Company Tracking Number:
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: 08-GL-2007803
Project Name/Number: Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803

Company and Contact

Filing Contact Information

Robert Wolfrom, CPCU, Regulatory Specialist robert.wolfrom@ace-ina.com
436 Walnut Street (215) 640-5123 [Phone]
Philadelphia, PA 19106 (215) 640-4986[FAX]

Filing Company Information

ACE American Insurance Company	CoCode: 22667	State of Domicile: Pennsylvania
PO Box 1000	Group Code: 626	Company Type:
436 Walnut Street		
Philadelphia, PA 19106	Group Name:	State ID Number:
(215) 640-5123 ext. [Phone]	FEIN Number: 95-2371728	

Indemnity Insurance Company of North America	CoCode: 43575	State of Domicile: Pennsylvania
PO Box 1000	Group Code: 626	Company Type:
436 Walnut Street		
Philadelphia, PA 19106	Group Name:	State ID Number:
(215) 640-5123 ext. [Phone]	FEIN Number: 06-1016108	

Pacific Employers Insurance Company	CoCode: 22748	State of Domicile: Pennsylvania
PO Box 1000	Group Code: 626	Company Type:
436 Walnut Street		
Philadelphia, PA 19106	Group Name:	State ID Number:
(215) 640-5123 ext. [Phone]	FEIN Number: 95-1077060	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	
Per Company:	No

SERFF Tracking Number: ACEH-125774935 State: Arkansas
First Filing Company: ACE American Insurance Company, ... State Tracking Number: EFT \$50
Company Tracking Number:
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: 08-GL-2007803
Project Name/Number: Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
ACE American Insurance Company	\$50.00	08/15/2008	21960473
Indemnity Insurance Company of North America	\$0.00	08/15/2008	
Pacific Employers Insurance Company	\$0.00	08/15/2008	

SERFF Tracking Number: *ACEH-125774935* *State:* *Arkansas*
First Filing Company: *ACE American Insurance Company, ...* *State Tracking Number:* *EFT \$50*
Company Tracking Number:
TOI: *17.0 Other Liability - Claims Made/Occurrence* *Sub-TOI:* *17.0001 Commercial General Liability*
Product Name: *08-GL-2007803*
Project Name/Number: *Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803*

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	09/05/2008	09/05/2008

SERFF Tracking Number: ACEH-125774935 State: Arkansas
First Filing Company: ACE American Insurance Company, ... State Tracking Number: EFT \$50
Company Tracking Number:
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: 08-GL-2007803
Project Name/Number: Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803

Disposition

Disposition Date: 09/05/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

SERFF Tracking Number: ACEH-125774935 State: Arkansas

First Filing Company: ACE American Insurance Company, ... State Tracking Number: EFT \$50

Company Tracking Number:

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability

Product Name: 08-GL-2007803

Project Name/Number: Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Filing Memo	Approved	Yes
Form	Member Certificate Commercial General Liability	Approved	Yes
Form	"Insured Event" Aggregate Limit	Approved	Yes
Form	Amendatory Endorsement Entertainment Services, Inc. A Risk Purchasing Group	Approved	Yes
Form	Amendment - Damage To Property	Approved	Yes

SERFF Tracking Number: ACEH-125774935 State: Arkansas

First Filing Company: ACE American Insurance Company, ... State Tracking Number: EFT \$50

Company Tracking Number:

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability

Product Name: 08-GL-2007803

Project Name/Number: Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Member Certificate Commercial General Liability	LD-25450	(07/08)	Endorsement New nt/Amendment/Conditions		0.00	LD-25450 07-08.pdf
Approved	"Insured Event" Aggregate Limit	LD-25451	(07/08)	Endorsement New nt/Amendment/Conditions		0.00	LD-25451 07-08.pdf
Approved	Amendatory Endorsement Entertainment Services, Inc. A Risk Purchasing Group	LD-25452	(07/08)	Endorsement New nt/Amendment/Conditions		0.00	LD-25452 07-08.pdf
Approved	Amendment - Damage To Property	LD-25453	(07/08)	Endorsement New nt/Amendment/Conditions		0.00	LD-25453 07-08.pdf



ACE American Insurance Company
436 Walnut Street
Philadelphia, PA. 19106

**MEMBER CERTIFICATE
COMMERCIAL GENERAL LIABILITY**

Insured Member and Address:

A Member of Entertainment Services,
Inc. conducting, participating in, or
sponsoring "insured events"

Named Insured:

Entertainment Services, Inc., a risk purchasing group,
organized under the laws of the State of Kansas
4300 Shawnee Mission Parkway
Fairway, KS 66205

Policy No.

Policy Period

Member Certificate No. -

Certificate Coverage Period: From: _____ To: _____ at 12:01 A.M. Standard Time
at the address of the Insured Member

COVERAGE	
THIS CERTIFICATE OF INSURANCE IS ISSUED AS NOTICE OF INSURANCE FOR THE "INSURED MEMBER" FOR THE SCHEDULE OF "INSURED EVENTS" REFERENCED HEREIN. THIS CERTIFICATE AND THE INSURANCE POLICY ISSUED TO THE NAMED INSURED FORM THE ENTIRE CONTRACT WITH RESPECT TO THE "INSURED MEMBER". THIS CERTIFICATE IS FURNISHED IN ACCORDANCE WITH AND IN ALL RESPECTS IS SUBJECT TO THE TERMS OF THE POLICY.	
LIMITS OF INSURANCE	
\$	Each "Insured Event" Aggregate
\$	General Aggregate
\$	Products/ Completed Operations Aggregate
\$	"Physical Abuse" or "Sexual Misconduct" Aggregate
\$	Each Occurrence
\$	Personal and Advertising Injury
\$	Participants Liability Each Occurrence
\$	Each Act of "Physical Abuse" or "Sexual Misconduct" Liability
\$	Damage to Premises Rented to You
\$	Medical Expense (Any one person or organization, excluding Participants)
\$	Per Accident (Non-Owned and Rented Automobile Liability)
Schedule of "Insured Events"	
All organized activities or functions of an "insured member" for which a premium has been paid.	
Premium	



ACE American Insurance Company
436 Walnut Street
Philadelphia, PA. 19106

**MEMBER CERTIFICATE
COMMERICAL GENERAL LIABILITY**

Schedule of Additional Insured(s)

The below entities are added as additional insured(s) to the certificate subject to the scheduled applicable additional insured endorsement.

Name and Address of Additional Insured:

Name and Address of Additional Insured:

Forms and Endorsements attached to the policy at inception:

William R. Neltherson IV

Authorized Agent

“INSURED EVENT” AGGREGATE LIMIT

Named Insured			Endorsement Number
Policy Symbol	Policy Number	Policy Period to	Effective Date of Endorsement
Issued By (Name of Insurance Company)			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

- A. For all sums which the insured becomes legally obligated to pay as damages caused by “occurrences” under COVERAGE A (SECTION I), and for all medical expenses caused by accidents under COVERAGE C (SECTION I), which can be attributed only to operations at a single “insured event”:
 - 1. A separate Each “Insured Event” Aggregate Limit applies to each “insured event”, and that limit is equal to the amount of the General Aggregate Limit shown in the Declarations.
 - 2. The Each “Insured Event” Aggregate Limit is the most we will pay for the sum of all damages under COVERAGE A, except damages because of “bodily injury” or “property damage” included in the “products-completed operations hazard”, and for medical expenses under COVERAGE C regardless of the number of:
 - a) Insureds;
 - b) Claims made or “suits” brought; or
 - c) Persons or organizations making claims or bringing “suits”.
 - 3. Any payments made under COVERAGE A for damages or under COVERAGE C for medical expenses shall reduce the Each “Insured Event” Aggregate Limit for that “insured event”. Such payments shall not reduce the General Aggregate Limit shown in the Declarations nor shall they reduce any other Each “Insured Event” Aggregate Limit for any other “insured event”.
 - 4. The limits shown in the Declarations for Each Occurrence, Damages To Premises Rented To You, and Medical Expense continue to apply. However, instead of being subject to the General Aggregate Limit shown in the Declarations, such limits will be subject to the applicable Each “Insured Event” Aggregate Limit.
- B. For all sums which the insured becomes legally obligated to pay as damages caused by “occurrences” under COVERAGE A (SECTION I), and for all medical expenses caused by accidents under COVERAGE C (SECTION I), which cannot be attributed only to operations at a single “insured event”:
 - 1. Any payments made under COVERAGE A for damages or under COVERAGE C for medical expenses shall reduce the amount available under the General Aggregate Limit or the Products/Completed Operations Aggregate Limit, whichever is applicable; and
 - 2. Such payments shall not reduce any Each “Insured Event” Aggregate Limit.
- C. When coverage for liability arising out of the “products-completed operations hazard” is provided, any payments for damages because of “bodily injury” or “property damage” included in the “products-completed operations hazard” will reduce the Products/Completed Operations Aggregate Limit, and not reduce the General Aggregate Limit or the Each “Insured Event” Aggregate Limit.
- D. For the purposes of this endorsement, the Definitions Section is amended by the addition of the following definitions:
 - 1. “Insured Events” means all organized activities or functions conducted by an “insured member” for which a premium has been paid.

2. "Insured Member" means such person or organization who is a qualified member of Entertainment Services, Inc., a risk purchasing group organized under the laws of the state of Kansas.

- E. The provisions of Limits of Insurance (SECTION III) not otherwise modified by this endorsement shall continue to apply as stipulated.

Authorized Agent

**AMENDATORY ENDORSEMENT
ENTERTAINMENT SERVICES, INC. A RISK PURCHASING GROUP**

Named Insured			Endorsement Number
Policy Symbol	Policy Number	Policy Period to	Effective Date of Endorsement
Issued By (Name of Insurance Company)			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

1. SECTION II - WHO IS AN INSURED is amended to include:

An "insured member" conducting, participating in, or sponsoring "insured events".

2. SECTION III – LIMITS OF INSURANCE

The Limits of Insurance on the Declarations apply separately to each "insured member."

3. SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS

Wherever the words first Named Insured appear in this Section they are replaced by Entertainment Services Inc., a risk purchasing group organized under the laws of the state of Kansas.

4. SECTION V – DEFINITIONS

The following definitions are added:

"Insured Events" means all organized activities or functions conducted by an "insured member" for which a premium has been paid.

"Insured Member" means such person or organization who is a qualified member of Entertainment Services Inc., a risk purchasing group organized under the laws of the state of Kansas.

Authorized Agent

AMENDMENT - DAMAGE TO PROPERTY

Named Insured			Endorsement Number
Policy Symbol	Policy Number	Policy Period to	Effective Date of Endorsement
Issued By (Name of Insurance Company)			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies all insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

The paragraph immediately following Paragraph **(6)** of **Exclusion j. Damage To Property** is deleted and replaced by the following:

Paragraphs **(1)**, **(3)** and **(4)** of this exclusion do not apply to "property damage" (other than damage by fire) to premises, including the contents of such premises, rented to you for a period of 30 or fewer consecutive days. A separate limit of insurance applies to Damage To Premises Rented To You as described in Section **III** – Limits Of Insurance.

LD -25453 (07/08)

Authorized Agent

SERFF Tracking Number: *ACEH-125774935* *State:* *Arkansas*
First Filing Company: *ACE American Insurance Company, ...* *State Tracking Number:* *EFT \$50*
Company Tracking Number:
TOI: *17.0 Other Liability - Claims Made/Occurrence* *Sub-TOI:* *17.0001 Commercial General Liability*
Product Name: *08-GL-2007803*
Project Name/Number: *Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: ACEH-125774935 State: Arkansas
First Filing Company: ACE American Insurance Company, ... State Tracking Number: EFT \$50
Company Tracking Number:
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: 08-GL-2007803
Project Name/Number: Independent forms filing for Entertainment Services Risk Purchasing Group/08-GL-2007803

Supporting Document Schedules

		Review Status:	
Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Approved	09/05/2008

Comments:

Naic Transmittal Document and Form Filing Schedule

Attachments:

NAIC Transmittal Document & Form Filing Schedule.pdf
Forms Schedule 08-GL-2007803_CW.pdf

		Review Status:	
Satisfied -Name:	Filing Memo	Approved	09/05/2008

Comments:

Attachment:

Filing Memorandum 08-GL-2007803_CW.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only a. Date the filing is received: b. Analyst: c. Disposition: d. Date of disposition of the filing: e. Effective date of filing: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">New Business</div> <div style="width: 55%;"></div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">Renewal Business</div> <div style="width: 55%;"></div> </div> f. State Filing #: g. SERFF Filing #: h. Subject Codes
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3.	Group Name	Group NAIC #
	ACE Copmpanies	626

4.	Company Name(s)	Domicile	NAIC #	FEIN #
	ACE American Insurance Company	22667	PA	95-2371728
	Indemnity Insurance Company of North America	43575	PA	06-1016108
	Pacific Employers Insurance Company	22748	PA	95-1077060

5.	Company Tracking Number	08-GL-2007803
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Robert E. Wolfrom 436 Walnut Street Philadelphia, PA 19106	Sr. Reglartory Specialist	215.640.5123	215.640.4986	

7.	Signature of authorized filer	
8.	Please print name of authorized filer	Robert E. Wolfrom

Filing information (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	Other Liability
10.	Sub-Type of Insurance (Sub-TOI)	Commercial General Liability
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12.	Company Program Title (Marketing title)	N/A
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14.	Effective Date(s) Requested	New: Upon Approval Renewal: Upon Approval

Property & Casualty Transmittal Document---

15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	
17.	Reference Organization # & Title	
18.	Company's Date of Filing	
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

20.	This filing transmittal is part of Company Tracking #	
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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purchasing group, organized under the laws of the state of Kansas. These forms are being filed in ACE American Insurance Company, Indemnity Insurance Company of North America and Pacific Employers Insurance Company.

LD-25450 Member Certificate Commercial General Liability

This form is provided to individual members of the risk purchasing group when a master policy is issued to Entertainment Services, Inc. This form clarifies coverage.

This form is mandatory. There is no premium associated with this form as it is a certificate.

LD-25451 Insured Event" Aggregate Limit

This form is attached to the ISO Commercial General Liability Coverage Form. The endorsement provides an Each "Insured Event" Aggregate Limit to each "insured event". This endorsement broadens coverage.

This endorsement is mandatory for any policy written in the risk purchasing group. There is no premium associated with this endorsement.

LD-25452 Amendatory Endorsement Entertainment Services, Inc., A Risk Purchasing Group

This form is attached to the ISO CGL Coverage Form when a Member Certificate is provided to individual members of the risk purchasing group and a master policy is issued to Entertainment Services, Inc. The endorsement amends WHO IS AN INSURED to include an "insured member" participating in "insured events"; states that the Limits of Insurance on the Declarations apply separately to each "insured member"; and that Entertainment Services, Inc. replaces the words first Named Insured found in the Conditions section. This endorsement broadens coverage.

This is a mandatory form and no premium is associated with the form.

LD-25453 Amendment – Damage To Property

This form broadens coverage in the CGL Coverage Form by changing the exception to the Damage To Property exclusion of paragraphs 1, 3 and 4 from 7 or fewer consecutive days to 30 or fewer consecutive days.

This is an optional form for any policy written in the risk purchasing group. There is no premium associated with this endorsement.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
<p>Check #: N/A Amount: N/A</p>	

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

14. Effective Date Requested: This is the effective date the company requested when they made the filing. It is not necessarily the date the filing officially becomes effective. This is also where the company can indicate the different effective dates for new or renewal business.

15. Reference Filing: Yes/No

16. Reference Organization (if applicable): The name of the advisory organization—i.e. ISO, NCCI, AAIS, etc. or an Insurance Company name if “me too filing” is permitted. Some states allow companies to reference another company’s filing. A “me too” filing is when one company adopts another company’s filing. Usually they are not part of the same group. You should check with each state to determine their rules on these filings. If permitted, use this area to indicate either an advisory organization name or “me too” company name.

17. Reference Organization Number & Title (if applicable): This is the unique number that the reference organization gives to the filing. It is generally not the same number as the circular number.

18. Company’s Date of filing: The date the company sends the filing.

19. Status of filing in domicile: Place for the company to show if filing has been filed in domicile and its status.

20. This filing transmittal is part of Company Tracking #: This ties all of the pages of the transmittal to the same filing. It is helpful for the state.

21. Filing Description: This area can be used in lieu of a cover letter or filing memorandum and is free-form text.

22. Filing Fees: Please refer to each state’s checklist for additional state specific requirements or instructions on calculating fees.

ACE Forms Schedule

	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Broaden, Restrict, or Clarify	Mandatory / Optional/ Rate Impact
01	MEMBER CERTIFICATE COMMERCIAL GENERAL LIABILITY	LD-25450 (07/08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input checked="" type="checkbox"/> Clarify	<input checked="" type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
02	"Insured Event" Aggregate Limit	LD-25451 (07/08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input checked="" type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input checked="" type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
03	Amendatory Endorsement Entertainment Services, Inc. A Risk Purchasing Group	LD-25452 (07/08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input checked="" type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input checked="" type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
04	Amendment - Damage To Property	LD-25453 (07/08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input checked="" type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input type="checkbox"/> Mandatory <input checked="" type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		<input type="checkbox"/> Broaden <input type="checkbox"/> Restrict <input type="checkbox"/> Clarify	<input type="checkbox"/> Mandatory <input type="checkbox"/> Optional <input type="checkbox"/> Rate Impact

Filing Memorandum

New independent forms are being filed in support of Entertainment Services, Inc. a risk purchasing group, organized under the laws of the state of Kansas. These forms are being filed in ACE American Insurance Company, Indemnity Insurance Company of North America and Pacific Employers Insurance Company.

LD-25450 Member Certificate Commercial General Liability

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LD-25451 Insured Event" Aggregate Limit

This form is attached to the ISO Commercial General Liability Coverage Form. The endorsement provides an Each "Insured Event" Aggregate Limit to each "insured event". This endorsement broadens coverage.

This endorsement is mandatory for any policy written in the risk purchasing group. There is no premium associated with this endorsement.

LD-25452 Amendatory Endorsement Entertainment Services, Inc., A Risk Purchasing Group

This form is attached to the ISO CGL Coverage Form when a Member Certificate is provided to individual members of the risk purchasing group and a master policy is issued to Entertainment Services, Inc. The endorsement amends WHO IS AN INSURED to include an "insured member" participating in "insured events"; states that the Limits of Insurance on the Declarations apply separately to each "insured member"; and that Entertainment Services, Inc. replaces the words first Named Insured found in the Conditions section. This endorsement broadens coverage.

This is a mandatory form and no premium is associated with the form.

LD-25453 Amendment – Damage To Property

This form broadens coverage in the CGL Coverage Form by changing the exception to the Damage To Property exclusion of paragraphs 1, 3 and 4 from 7 or fewer consecutive days to 30 or fewer consecutive days.

This is an optional form for any policy written in the risk purchasing group. There is no premium associated with this endorsement.